	PATENT	F APPLICA Eff	TION FEE ective Dece	JNB	1/1/	150	1561					
	CLAIMS AS FILED - PART I							SMALL ENT	777 IIY	OR	OTHER T	
			(Column	1)	((	Column 2)		RATE	FEE	1	RATE	FEE
U.S.	NATIONAL S	STAGE FEES							1/1	00	BASIC FEE	
BASIC FEE			SMALL ENT.			E ENT. = \$ 300		BASIC FEE	1714	OR		·
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50 / \$100			er situations = 100 / \$ 200		EXAM. FEE	1:11		EXAM. FEE	
SEARCH FEE			U.S. is ISA = \$ ALL other cour \$ 200 / \$ 4	ntries =		er situations = 250 / \$ 500		SEARCH FEE	50		SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			minu	s 100 =		/ 50 =		X \$ 125 =	· ·	·	X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			77) minus 20 = . / ()			)		X \$ 25 =	250	OR	X \$ 50 =	
INDEPENDENT CLAIMS			minus 3 = .					X \$ 100 =	3.70	OR	X \$ 200 =	
MUL	TIPLE DEPEND	DENT CLAIM PRO	SENT					+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter *0* in column						lumn 2		TOTAL	35//	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	NTITY			
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	•••		=		X \$ 100 =		OR	X \$ 200 =	
	, , ,	ENTATION OF M	MULTIPLE DEPENDENT CLAIM					+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT.		OR	TOTAL ADDIT. FEE	
						(0.4						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER		HIGH NUM PREVI	mn 2) IEST IBER OUSLY FOR	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	AMENDMENT *	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	•.	Minus	***		= ·		X \$ 100 =		OR	X \$ 200 =	
~	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".												
. ***	* If the "Highest No		Hd For" IN THIS 51 4 For" (Total or loc				1 in t	he appropriate bo	ox in column 1	í.		

FORM PTO-875 (Rev. 02/2005)

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Application of comer number